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**FILED**

*#21*  
JUL *20* 2007

RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

*P19908*

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

FREDERICK GATLIN

Plaintiff,

vs.

JAMES TILTON

Defendant.

CASE NO. *07-3696 CW*

**PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS**

I, FREDERICK GATLIN, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_ No **X**

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer: N/A

Gross: Ø Net: Ø

Employer: N/A

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 N/A

5 \_\_\_\_\_  
 6 \_\_\_\_\_  
 7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or Yes \_\_\_\_ No x

10 self employment

11 b. Income from stocks, bonds, Yes \_\_\_\_ No x

12 or royalties?

13 c. Rent payments? Yes \_\_\_\_ No x

14 d. Pensions, annuities, or Yes \_\_\_\_ No x

15 life insurance payments?

16 e. Federal or State welfare payments, Yes \_\_\_\_ No x

17 Social Security or other govern-

18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 N/A

22 \_\_\_\_\_  
 23 3. Are you married? Yes \_\_\_\_ No x

24 Spouse's Full Name: N/A

25 Spouse's Place of Employment: N/A

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ Ø Net \$ Ø

28 4. a. List amount you contribute to your spouse's support: \$ Ø

- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

N/A

5. Do you own or are you buying a home? Yes \_\_\_ No x

Estimated Market Value: \$ Ø Amount of Mortgage: \$ Ø

6. Do you own an automobile? Yes \_\_\_ No x

Make N/A Year --- Model ---

Is it financed? Yes \_\_\_ No x If so, Total due: \$ Ø

Monthly Payment: \$ Ø

7. Do you have a bank account? Yes \_\_\_ No x (Do not include account numbers.)

Name(s) and address(es) of bank: N/A

Present balance(s): \$ Ø

Do you own any cash? Yes \_\_\_ No x Amount: \$ Ø

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes \_\_\_ No x

8. What are your monthly expenses?

Rent: \$ Ø Utilities: Ø

Food: \$ Ø Clothing: Ø

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>
<u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>
<u>                    </u>	\$ <u>                    </u>	\$ <u>                    </u>

9. Do

1 you have any other debts? (List current obligations, indicating amounts and to whom they are  
2 payable. Do not include account numbers.)

3 N/A

4 NOTE: Petitioner is incarcerated in prison/reason for 0 money.

5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes        No X

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9 N/A

10  
11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15  
16 7/15/2007

17 DATE

18  
19   
20 FREDERICK GATLON  
21 SIGNATURE OF APPLICANT  
22  
23  
24  
25  
26  
27  
28

19 NOTE: PETITIONER HAS BEEN INCARCERATED SINCE (1999) AND  
20 DOES NOT HAVE ANY INCOME...

Case Number: \_\_\_\_\_

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

719908

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of \_\_\_\_\_ for the last six months at

[prisoner name]

GATLIN, F.

CMF

where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ \_\_\_\_\_ and the average balance in the prisoner's account each month for the most recent 6-month period was \$ \_\_\_\_\_.

Dated: 7-17-07



[Authorized officer of the institution]

REPORT ID: TS3030

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CALIFORNIA DEPARTMENT OF CORRECTIONS  
CALIFORNIA MEDICAL FACILITY  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

REPORT DATE: 07/17/07  
PAGE NO: 1

FOR THE PERIOD: JAN. 01, 2007 THRU JUL. 17, 2007

ACCOUNT NUMBER : P19908  
ACCOUNT NAME : GATLIN, FREDRICK JOHN  
PRIVILEGE GROUP: A  
BED/CELL NUMBER: MIP100000000108L  
ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	0.00	0.00



THE WITHIN INSTRUMENT IS A CORRECT  
COPY OF THE TRUST ACCOUNT MAINTAINED  
BY THIS OFFICE

ATTEST:

7-17-07

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY M. J. [Signature]  
TRUST OFFICE

CURRENT  
AVAILABLE  
BALANCE  
0.00